SAURASHTRA UNIVERSITY

University Campus, Rajkot - 360 005 INDIA. URL : www.saurashtrauniversity.edu

STATEMENT OF MARKS

This Statement of marks shows the number of marks obtained by Shri/Smt./Kumari Sr.No. **416**

MAKWANA DHARMESH DILIPBHAI

In each head of passing at the **B.H.M.S. FOURTH YEAR**

College / Department **LALITABEN RAMNIKLAL SHAH HOMOEOPATHY COLLEGE, ANANDPAR**

Seat No.	Examination held in	Examination Centre
4418	**JUNE-2023**	**76 / 7602 ANANDPAR**

Subject Name	Theory Marks			Practical & Viva			Total Marks		
	Max.	Min.	Obtained	Max.	Min.	Obtained	Max.	Min.	Obtained
PRACTICE OF MEDICINE	200	100	**103**	200	100	**115**	400	---	**218**
HOMOEOPATHIC MATERIAL MEDICA	200	100	**122**	200	100	**040**	400	---	**162**
ORGANON OF MEDICINE WITH HOMEO	200	100	**141**	100	050	**050**	300	---	**191**
REPERTORY	100	050	**056**	100	050	**016**	200	---	**072**
COMMUNITY MEDICINE	100	050	**051**	100	050	**031**	200	---	**082**
							1500	**750**	**725**

RESULT **FAIL**

Remarks:

Notes			
XOO	: Indicates Exemption At a Previous Examination	FIRST-DIST.	: First Class with Distinction
AOO	: Absent	FIRST	: First Class
ZOO	: Zero	SECOND	: Second Class
		STAR (*)	: Entitled For Exemption

Rajkot - 360 005, Gujarat, INDIA. Date of Issue **09/08/2023**

P.I. No. 6866

Controller of Examinations

PASSING CERTIFICATE

I certify that Shri / Smt. / Kumari **********

has appeared at **********

examination held by the Saurashtra University, Rajkot.

His / Her Seat No. Month & Year of Examination and Class obtained are as mentioned here below.

Seat No.	Month & Year of Examination	Class Obtained
*****	**********	********** ***

Note: No change in any entry is to be made except by the authority issuing the certificate and that the infringement of the rule will be severely dealt with.

SAURASHTRA UNIVERSITY

University Campus, Rajkot - 360 005 INDIA. URL : www.saurashtrauniversity.edu

STATEMENT OF MARKS

This Statement of marks shows the number of marks obtained by Shri/Smt./Kumari Sr.No. **45**

MAKWANA DHARMESH DILIPBHAI

In each head of passing at the **B.H.M.S. FOURTH YEAR**

College / Department **LALITABEN RAMNIKLAL SHAH HOMOEOPATHY COLLEGE, ANANDPAR**

Seat No.	Examination held in	Examination Centre
4043	**SEP-2023**	**23 / 7602 RAJKOT**

Subject Name	Theory Marks			Practical & Viva			Total Marks		
	Max.	Min.	Obtained	Max.	Min.	Obtained	Max.	Min.	Obtained
PRACTICE OF MEDICINE	200	100	**X00**	200	100	**X00**	400	---	**X00**
HOMOEOPATHIC MATERIAL MEDICA	200	100	**131**	200	100	**104**	400	---	**235**
ORGANON OF MEDICINE WITH HOMEO	200	100	**X00**	100	050	**X00**	300	---	**X00**
REPERTORY	100	050	**063**	100	050	**065**	200	---	**128**
COMMUNITY MEDICINE	100	050	**069**	100	050	**053**	200	---	**122**
							1500	**750**	**485**

RESULT **PASS**

Remarks:

Notes

XOO : Indicates Exemption At a Previous Examination

AOO : Absent

ZOO : Zero

FIRST-DIST. : First Class with Distinction

FIRST : First Class

SECOND : Second Class

STAR (*) : Entitled For Exemption

Rajkot - 360 005, Gujarat, INDIA.

Date of Issue **08/10/2023**

P.I. No. 6866

Controller of Examinations

PASSING CERTIFICATE

I certify that Shri / Smt. / Kumari **MAKWANA DHARMESH DILIPBHAI**

has appeared at **B.H.M.S. FOURTH YEAR**

examination held by the Saurashtra University, Rajkot.

His / Her Seat No. Month & Year of Examination and Class obtained are as mentioned here below.

Seat No.	Month & Year of Examination	Class Obtained
4043	**SEP-2023**	**PASS**

Note: No change in any entry is to be made except by the authority issuing the certificate and that the infringement of the rule will be severely dealt with.